Print witness name



## Louisiana Department of Revenue Affidavit of Fraudulent Refund Deposit for Married Filing Jointly Filing Status

NOTICE: The person alleging fraud must execute the affidavit in the presence of the Notary Public. State of Parish/County of 1. We are first duly sworn and state that our names are: Taxpaver's First Name Middle Init. Last Name Taxpayer's SSN Spouse's First Name Middle Init. Last Name Spouse's SSN Mailing Address **Email Address** State Primary Telephone Number Secondary Telephone Number 2. We state that the Louisiana Department of Revenue refund deposit listed below was not authorized by us and was fraudulently deposited as described below without our knowledge or authorization. Bank where the refund was deposited. Bank account where the refund was deposited. Deposit date Deposit amount Taxpayer's Bank Taxpayer's Bank Account No. Account status at the time of fraud O Closed Open Spouse's Bank Spouse's Bank Account No Account status at the time of fraud Open O Closed 3. We state that we did not receive any part of the proceeds of this deposit, directly or indirectly, and that this affidavit is made voluntarily for the purpose of establishing the fact that the deposit was made fraudulently without our knowledge or authorization. 4. Do you know who fraudulently deposited the refund? O No. O Yes. If yes, provide details. 5. We understand this fraud is subject to investigation by local, state and federal law enforcement agencies and that we may be required to comply with a court order or subpoena to give testimony. 6. We understand making a false sworn statement is subject to federal and state statutes and may be punishable by fines and/or by imprisonment. Thus Sworn to and Subscribed Before Me, Notary, in the presence of the undersigned two witnesses, who personally came and appeared,  $\_$  day of  $\_$ Taxpayer's Signature Spouse's Signature Signature of witness Notary Print witness name Print name of Notary and Notary Number (Must include seal) Signature of witness